POSITION	INITIALS	ID NO.	DATE
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O.I.P.E. CLASSIFIER		4	2/
FORMALITY REVIEW	H.S	866	03·16·01
RESPONSE FORMALITY REVIEW	W.D	625	6-01-01

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
— (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   0 .... Objected

Claim Final	Original	Date									
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C.C.
03-16-01

If more than 150 claims or 10 actions
staple additional sheet here

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